510(k) Summary

JUN 2 3 2006

Submitter's Name/Address

Contact Person

Abbott Laboratories

Linda Morris

1921 Hurd Drive

Senior Regulatory Specialist, MS 2-11

Regulatory Affairs Irving, TX 75038

(972) 518-6711

Fax (972) 518-7479

Date of Preparation of this Summary:

April 26, 2006

Device Trade or Proprietary Name:

Creatinine

Device Common/Usual Name or

Creatinine

Classification Number/Class:

Class II 862.1125

Product Code:

Classification Name:

CGX

This summary of 510(k) safety and effectiveness information is being submitted in accordance with the requirements of SMDA 1990 and 21 CFR 807.92.

The assigned 510(k) number is: $k \circ 61193$

Test Description:

Creatinine is an in vitro diagnostic assay for the quantitative analysis of creatinine in human serum, plasma, or urine. At an alkaline pH, creatinine in the sample reacts with picrate to form a creatinine-picrate complex. The rate of increase in absorbance at 500 nm due to the formation of this complex is directly proportional to the concentration of creatinine in the sample.

Substantial Equivalence:

The Creatinine assay is substantially equivalent to the Roche Creatinine assay (K941837) on the Hitachi 917 Analyzer. Both assays yield similar Performance Characteristics.

Similarities:

- Both assays can be used for the quantitation of creatinine.
- Both assays yield similar results.
- Both assays are based on the modified Jaffe (creatinine alkaline picrate) methodology.
- Both assays use serum, plasma, and urine

Differences:

None

Intended Use:

The Creatinine assay is used for the quantitation of creatinine in human serum, plasma, or urine.

Performance Characteristics:

Comparative performance studies were conducted using the AEROSET® System. The Creatinine assay method comparison yielded acceptable correlation with the Creatinine assay on the Hitachi 917 Analyzer. The AEROSET System showed a correlation coefficient of 0.9996, slope of 0.98, and Y-intercept of – 0.19 mg/dL for the serum application and a correlation coefficient of 0.9992, slope of 0.94, and Y-intercept of – 3.66 mg/dL for the urine application when compared to the Hitachi 917 Analyzer. The ARCHITECT c8000 System showed a correlation coefficient of 0.9993, slope of 0.96, and Y-intercept of – 0.24 mg/dL for the serum application and a correlation coefficient of 0.9990, slope of 0.93, and Y-intercept of – 4.16 mg/dL for the urine application when compared to the Hitachi 917 Analyzer. The ARCHITECT c8000 System showed a correlation coefficient of 0.9996, slope

Creatinine - Conc. 510(k) - R2 June 13, 2006 of 0.98, and Y-intercept of -0.06 mg/dL for the serum application and a correlation

coefficient of 0.9997, slope of 0.99, and Y-intercept of - 0.51 mg/dL for the urine application

when compared to the AEROSET System. The Creatinine assay method comparison yielded

acceptable correlation between the AEROSET System and the ARCHITECT c8000 System.

Precision studies were conducted using the Creatinine assay. On the AEROSET System, the

total %CV for Level 1 is 4.95%, and Level 2 is 3.18% for the serum application and the total

%CV for Level 1 is 2.41%, and Level 2 is 2.41% for the urine application. On the

ARCHITECT c8000 System, the total %CV for Level 1 is 3.10%, and Level 2 is 1.54% for

the serum application and the total %CV for Level 1 is 0.94%, and Level 2 is 0.99% for the

urine application.

The Creatinine assay is linear from 0.20 to 37.00 mg/dL for the serum application.

The Creatinine assay is linear from 5.0 to 740.0 mg/dL for the urine application. The limit of

quantitation (sensitivity) of the Creatinine assay is 0.10 mg/dL for the serum application, and

2.0 mg/dL for the urine application.

These data demonstrate that the performance of the Creatinine assay is substantially equivalent

to the performance of the Creatinine assay on the Hitachi 917 Analyzer.

Conclusion:

The Creatinine assay on the AEROSET and the ARCHITECT c8000 Systems is substantially

equivalent to the Roche Creatinine assay on the Hitachi 917 Analyzer as demonstrated by

results obtained in the studies.

Creatinine - Conc. 510(k) - R2 June 13, 2006





Food and Drug Administration 2098 Gaither Road Rockville MD 20850

Ms. Linda Morris Sr. Regulatory Specialist ADD Regulatory Affairs Abbott Laboratories Inc. 1921 Hurd Drive Irving, TX 75038

JUN 2 3 2006

Re:

k061193

Trade/Device Name: Abbott Clinical Chemistry Creatinine

Regulation Number: 21 CFR§862.1225 Regulation Name: Creatine test system

Regulatory Class: Class II Product Code: CGX Dated: April 26, 2006 Received: April 28, 2006

Dear Ms. Morris:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food. Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA). it may be subject to such additional controls. Existing major regulations affecting your device can be found in Title 21, Code of Federal Regulations (CFR), Parts 800 to 895. In addition, FDA may publish further announcements concerning your device in the <u>Federal Register</u>.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Parts 801 and 809); and good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820).

Page 2 -

This letter will allow you to begin marketing your device as described in your Section 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific information about the application of labeling requirements to your device, or questions on the promotion and advertising of your device, please contact the Office of In Vitro Diagnostic Device Evaluation and Safety at (240) 276-0484. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97). You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its Internet address http://www.fda.gov/cdrh/industry/support/index.html.

Sincerely yours,

Alberto Gutierrez, Ph.D.

Director

Division of Chemistry and Toxicology Office of In Vitro Diagnostic Device

Evaluation and Safety Center for Devices and

Radiological Health

Enclosure

Indications for Use

510(k) Number (if known): K 06 1193		
Device Name: Abbott Clinical Chemistry Cre	atinine	
Indications For Use:		
A creatinine test system is a device intended to measure creatinine levels in serum, plasma, and urine. Creatinine measurements are used in the diagnosis and treatment of renal diseases, in monitoring renal dialysis, and as a calculation basis for measuring othe urine analytes.		
Prescription UseX	AND/OR	Over-The-Counter Use
(Part 21 CFR 801 Subpart D)		(21 CFR 801 Subpart C)
(PLEASE DO NOT WRITE BELOW THI NEEDED)	S LINE-CONTIN	IUE ON ANOTHER PAGE IF
Concurrence of CDRH, Office o	f In Vitro Diagno	estic Devices (OIVD)
	•	Page 1 of <u>I</u>
How of in Vitro Diagnosis and Safety	wk fo	
one Whin		